

For Local 8 Members at Crisis Connections

November 27, 2023

OPEIU

Local

URGENT! Vote on Changes to Healthcare by 8am on 12/1/23!

At CC's request, our Union Stewards and Reps met with Alex (HR) and Sonja (Finance) on Wednesday, November 22nd, and Monday, November 27th, to discuss the possibility of changing health insurance providers in 2024. Because health insurance was negotiated as part of the union contract, any changes to our insurance needs to be agreed upon by a majority of voting employees. With some urgency, we need you to review the insurance options for 2024 (outlined below) and cast your vote so that CC can begin open enrollment with enough time before January 1, 2024.

Here's what you need to know:

Employees currently have medical benefits through Kaiser Permanente (KP). There are two KP plans to choose from: HMO Virtual Plus (more restricted network) and PPO (more flexible network).

The language in <u>Section 12.1 Medical/Vision/Dental Coverage</u> of our union contract says, "The Employer will maintain the current healthcare carrier, plan design, and the outlined benefit levels below for Kaiser Permanente PPO and HMO Virtual Plus plans and Delta Dental DPPO plan for the duration of this Agreement." This means, unless employees agree otherwise, CC is obligated to provide the same KP plans and to continue to pay the same negotiated percentage share of the premium through 2025.

However, CC has requested to change your healthcare carrier and plan design. CC was recently notified that KP's health insurance renewal rates for 2024 are set to increase the monthly premiums by over 25%. CC did not anticipate this unusually high increase and therefore did not budget for it. CC reports this 25% increase would create a budgetary challenge that could potentially lead to operational cuts. Further, CC has begun hiring more out-of-state employees and they state KP's coverage is more limited in areas outside of Washington State. In an effort to contain costs and increase coverage, CC asked us to change the healthcare carrier from KP to Aetna, whose bid reflected an 8% increase in premiums (as opposed to 25%). We informed them that this could only be accomplished by a vote of the membership.

Review the information below and <u>VOTE HERE</u> by 8am on Friday, December 1, 2023. The outcome will be decided by a simple majority of those who vote. Make your voice heard!

You are voting on whether you want CC to stay with KP or switch to Aetna. Your OPEIU Local 8 Reps and Stewards aren't making a recommendation to vote one way over another as there are both pros and cons to moving to the Aetna plan—it is truly dependent on your individual usage and needs. You can review the side-by-side comparisons summarizing the KP and Aetna plans below and make the decision best for you. You will notice, whereas KP offers the HMO and PPO, Aetna only offers a PPO option. For an even more in-depth overview, you can access the full Aetna PPO plan here. (Please note there is one error in this document- it says routine eye exams are not covered but we have confirmed they are and there is a \$250 annual hardware benefit as well).

		OPTION A			OPTION B	
	Kaiser Permane	Kaiser Permanente		Aetna		
Summary of Covered Benefits	Current Virtual Plus		Current Access PPO Waiver		Open Choice PPO - Washington	
Benefits	In-Network	Out-of- Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year Deductible	Embedded		Embedded		Embedded	
Individual	\$250	n/a	\$1,000	\$2,000	\$1,000	\$3,000
Family	\$500	n/a	\$3,000	\$6,000	\$2,000	\$6,000
Out-of-pocket Maximum (includes deductible & copays)	Embedded		Embedded		Embedded	
Individual	\$3,000	n/a	\$4,000	Unlimited	\$6,000	\$12.000
Family	\$6,000	n/a	\$12,000	Unlimited	\$12,000	\$24,000
Physician Services						
Primary Care Physician	Referred: \$10 copay / Non- Referred: 90% after deductible	Not covered	\$35 copay	50% after deductible	\$25 copay	50% after deductible
Specialist	Referred: \$30 copay / Non- Referred: 90% after deductible	Not covered	\$35 copay	50% after deductible	\$40 copay	50% after deductible
Telemedicine	Covered in full	Not covered	Covered in full	50% after deductible	Covered in full	50% after deductible
Preventive Care	Covered in full	Not covered	Covered in full	50% after deductible	Covered in full	50% after deductible
Behavioral Health Services						
Inpatient Mental Health or	90% after deductible	Not covered	80% after	50% after	80% after	50% after
Substance Abuse Services	D-f		deductible	deductible	deductible	deductible
Outpatient Mental Health or Substance Abuse Services	Referred: \$10 copay / Non- Referred: 90% after deductible	Not covered	\$35 copay	50% after deductible	\$25 copay	50% after deductible
Emergency Medical Care						
Inpatient Hospital Services	90% after deductible	Not covered	80% after deductible	50% after deductible	80% after deductible	50% after deductible
Emergency Room (ER) Care	90% after \$200 copay		80% after \$200 copay		80% after \$250 copay	
ER copay waived if admitted?	Yes		Yes		Yes	
Urgent Care	Primary Care: \$10 copay / Specialty Care: \$30 copay	90% after \$200 copay	\$35 copay	50% after deductible	\$50 copay	50% after deductible
Lab/X-Ray						
Diagnostic Lab/X-Ray	90% after deductible	Not covered	80% after deductible	50% after deductible	80% after deductible	50% after deductible
High Tech Services (MRI, CT	90% after deductible	Not covered	80% after	50% after	80% after	50% after
scans, etc.)	50% after deductible	Not covered	deductible	deductible	deductible	deductible
Prescriptions (30-day supply) Preferred Generic	¢10		£15		¢10	
Preferred Generic Preferred Brand	\$10 copay \$30 copay		\$15 copay		\$10 copay \$40 copay	
Non-Preferred Drugs	above cost share applies		\$50 copay \$95 copay		\$40 copay \$70 copay	
		Not covered		Not covered	70%	60%
Speciality Drugs	\$150 copay		\$150 copay	Not covered	*Max cost \$150 70%	
Non-Formulary Speciality Drugs	n/a		70%		*Max cost \$150	
Mail Order (90-day supply)	\$5/\$60/\$300		\$10/\$60/\$130		\$20/\$80/\$140	Not covered
Other Services and Supplies			80% after	50% after	80% after	50% after
Durable Medical Equipment	80% after deductible	Not covered	deductible	deductible	deductible	deductible
Home Health Care	Covered in full	Not covered	80% after deductible	50% after deductible	80% after deductible	50% after deductible
Skilled Nursing/Extended Care	90% after deductible	Not covered	80% after	50% after	80% after	50% after
Facility Hospice Care	Covered in full	Not covered	deductible 80% after	deductible 50% after	deductible 80% after	deductible 50% after
Chiropractic - Annual Limits	10 visits per yea	l ar	deductible 12 visits	deductible speryear	deductible 20 visits	deductible per year
Chiropractic Services	\$10 copay	Not covered	\$35 copay	50% after deductible	\$40 copay	50% after deductible
Acupuncture - Annual Limits	12 visits per yea	ar	12 visits	per year	20 visits	per year
Acupuncture	\$10 copay	Not covered	\$35 copay	50% after	\$25 copay	50% after
Outpatient Rehab Therapies -	45 visits per year		45 visits per year		25 vists per year	
Annual Limite				50% after	<i>t</i> 10	50% after
Annual Limits Physical, Occupational, & Speech	Primary Care: \$10 copay /	Not coursed	¢2E comos			
Physical, Occupational, & Speech Therapy	Primary Care: \$10 copay / Specialty Care: \$30 copay	Not covered	\$35 copay	deductible	\$40 copay	deductible
Physical, Occupational, & Speech Therapy Vision	Specialty Care: \$30 copay					
Physical, Occupational, & Speech Therapy	, , , , , , , , , , , , , , , , , , , ,		Once every	deductible y 12 months ed in full	Once every	deductible 12 months ed in full

The previously negotiated cost share for KP's PPO would be applied to Aetna's PPO (ex. employee pays 2% and Employer pays 98% of the monthly premium for "Employee Only" coverage), but the dollar amounts would vary per the chart below. Depending on whether you are currently on KP's HMO or PPO, your share of the monthly premium could go slightly up or down in 2024.

Level of Coverage	2024 KP HMO Monthly Premium Cost to Employee	2024 KP PPO Monthly Premium Cost to Employee	2024 Aetna PPO Monthly Premium Cost to Employee
Employee Only	\$0	\$19.09	\$16.08
Employee + Spouse	\$887.28	\$1,207.37	\$1,016.95
Employee +	\$642.34	\$928.61	\$782.17
Child(ren)			
Family	\$1,664.21	\$2,118.70	\$1,783.02

If you have any questions or need help interpreting any of this information, reach out to HR ASAP! You deserve to feel confident in your ability to make an informed decision about your healthcare.

Local 8 Union Stewards at CC Include:

Lauren Gougeon- Call Specialist, SK Lewis- Screener, Joseph Revard- Provider Outreach Coordinator, and Darby Robertson- CSC

As always, please contact your Union Representatives

<u>Valarie@opeiu8.org</u> and <u>Phoebe@opeiu8.org</u> with any questions, comments, or ideas.



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